

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

| | |
|--|---|
| NAME OF COMMITTEE (In Full) ESAFund | FEC IDENTIFICATION NUMBER ▼ C C00489856 |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | |
| MM / DD / YYYY 01 / 28 / 2016 | |

| | | | | |
|---|-------------|--|--|--|
| Full Name of Payee Red Eagle Media Group | | | Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 27 / 2016 | |
| Mailing Address 815 Slaters Lane | | | Amount 2900.00 | |
| City Alexandria | State VA | Zip Code 22314 | Transaction ID : SE.6444 | |
| Purpose of Expenditure media production | | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate Bernard Sanders | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA | |
| Calendar Year-To-Date Per Election for Office Sought | | 644878.00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

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|---|-------------|--|--|--|
| Full Name of Payee Red Eagle Media Group | | | Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 27 / 2016 | |
| Mailing Address 815 Slaters Lane | | | Amount 880.00 | |
| City Alexandria | State VA | Zip Code 22314 | Transaction ID : SE.6445 | |
| Purpose of Expenditure research | | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate Bernard Sanders | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA | |
| Calendar Year-To-Date Per Election for Office Sought | | 645758.00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 3780.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Nancy H. Watkins

[Electronically Filed]

Date

MM / DD / YYYY
01 / 28 / 2016

Signature